



National Association for  
Sport and Physical Education

*an association of the American Alliance for Health,  
Physical Education, Recreation and Dance*

**NASPE Sets the Standard**

**POSITION STATEMENT**

## **A Philosophical Position on Physical Activity and Fitness for Physical Activity Professionals**

**Position Statement:** Participating in regular physical activity at a level sufficient to promote health-related physical fitness is an important behavior for professionals in all fields of physical activity at all levels, including coaches, K-12 teachers, physical educators and kinesiology faculty members at higher education institutions, and fitness professionals.

From the beginning of the 20<sup>th</sup> century, authorities in our field have stressed how important it is for professionals in all fields related to physical activity to model active lifestyles and physical fitness (Cardinal, 2001; Corbin, 1984; Melville, 1999; Sargent, 1900; Staffo & Stier, 2000). A 2001 survey of physical activity-related professionals and pre-professionals indicated continued strong support for this view (Cardinal & Cardinal, 2001), with survey respondents agreeing that role modeling is a critical and powerful tool for health, physical education, recreation and dance (HPERD) professionals.

Several key aspects related to modeling in general, and modeling physical activity and fitness in particular, are presented in this paper. In particular:

- The behaviors of role models can influence learning in others.
- Participating regularly in physical activity provides physical educators and HPERD professionals with an important coping mechanism for relieving job stress and burnout.
- Achieving and maintaining health-related physical fitness (based on accepted criterion-referenced standards) is an appropriate expectation for all physical activity professionals.

### **The behaviors of role models can influence learning in others.**

Considerable research in diverse domains supports the tenets of social cognitive theory, pointing to the effectiveness of modeling as an important factor in altering human behaviors

(Bandura, 1997). Modeling is shown to be effective in working with negative eating behaviors and substance abuse (e.g., alcohol, smoking), and in influencing seatbelt use (Baranowski,

Perry & Parcel, 1997). In the psychomotor domain, extensive research has found that modeling can play a major role in motor skills acquisition (Ferrari, 1996; Maddalozzo, Stuart, Rose & Cardinal, 1999; McCullagh, 1993). The use of models also can promote perceptions of competence and feelings of self-efficacy. For example, Weiss, McCullagh, Smith and Berlant (1998) found that using models helped decrease fear among young, fearful swimmers, helped increase their perceptions of self-efficacy and aided in their learning swimming skills.

Research on modeling related to a physically active lifestyle indicates that children of physically active parents (i.e., parental models) are more likely to be active than children of sedentary parents (Freedson & Evenson, 1991; Moore, Lombardi, White, Campbell, Oliveria & Ellison, 1991). Furthermore, the evidence suggests that children who are active with their parents are likely to be more active than children who don't exercise with their parents (Sallis, 1988a; Sallis, 1988b).

Research also suggests that physical education teachers modeling a physically active lifestyle might exert similar positive influence over youths (Cardinal, 2001; Melville & Maddalozzo, 1988). In a study of 6<sup>th</sup>- through 8<sup>th</sup>-grade students, Gilmer, Speck, Bradley, Harrell & Belyea (1996) found that teachers and coaches were the most frequently cited adult role models other than family members. Furthermore, research suggests, physical education specialists can serve as role models for their colleagues and parents of the students they teach (Chodzko-Zajko, Zhu, Bazzarre, Castelli, Graber & Woods, 2008).

Modeling effects for physical activity have been examined in medical professionals, as well (Hash, Munna, Vogel & Bason, 2003; Rogers, Gutin, Humphries, Lemmon, Waller, Baranowski & Saunders, 2005; Rogers, Gutin, Humphries, Lemmon, Waller, Baranowski & Saunders, 2006). Hash, Munna, Vogel, & Bason (2003) found that patients considered their physicians to be more credible and better equipped to help motivate them to become physically active if the physicians appeared to be practicing healthy life behaviors themselves. Patients also reported that they expected their physicians to engage in healthy lifestyle activities.

It also appears that engaging in physical activity can enrich physicians' counseling behaviors. Rogers, et al. (2005; 2006) found that when physicians were physically active on a regular basis, they were more confident in guiding their patients through a physical activity regimen and felt more effective in doing so. The same could hold true for physical educators, coaches and health-related professionals: engaging in regular physical activity could increase their credibility among students, clients and the community, as well as reinforcing their self-efficacy to design effective physical activity programs for children and youths.

**Implications:** Models can influence many attitudes and behaviors, including health practices, motor skill acquisition and the adoption of physical activity patterns. Physical educators, coaches and other professionals in fitness and physical activity carry strong modeling status among many children and youths.

**Participating regularly in physical activity provides physical educators and HPERD professionals with an important coping mechanism for relieving job stress and burnout.**

Engaging in a physically active lifestyle is important for personal reasons. That proposition is based on the substantive evidence linking employee physical activity to a wide range of positive individual outcomes at work, such as greater productivity, reduced chronic stress responses (e.g., absenteeism, turnover) and greater job satisfaction (Innstrand, Espnes & Mykletun, 2004; Kouvonen, Kivimaki, Elovainio, Virtanen, Linna & Vahtera, 2005; Opatz, 1994; Tian & Wang, 2005; Van Rhenen, Blonk, van der Klink, van Dijk & Schaufeli, 2005). Those studies highlight physical activity's influential coping effect among diverse samples of workers across the globe.

For some time, related research on teachers has identified the stress-reduction capacity of physical activity and exercise (Newbrough, 1982). Two intervention-based studies found that teachers reported less stress and anxiety after eight weeks of an individualized exercise program (Long, 1988); and they reported improved fitness, lowered blood pressure, weight loss and higher levels of general well-being and job-related stress-coping ability after a 10-week wellness program that included an exercise component (Blair, Collingwood, Reynolds, Smith, Hogan & Sterling, 1984). Also, Blair, et al. (1984) found that both principal and self-ratings of the teachers' stress management and performance were higher among those teachers who participated in the wellness program.

In a survey of 38 teachers, Austin, Shah & Muncer (2005) found exercise to be the most advantageous coping strategy for reducing stress. And physical activity doesn't have to occur outside of work to mitigate teachers' job stress. Carson, Baumgartner, Matthews & Tsouloupas (in review) found that teachers with higher workplace physical activity levels reported lower teacher burnout levels.

**Implications:** Regular physical activity participation has been associated with lower levels of job stress. Professionals who adopt a physically active lifestyle likely will lead longer and happier careers. It's reasonable to assume that physical educators and other physical activity professionals who exhibit active lifestyles can expect to experience similar benefits.

**Achieving and maintaining health-related physical fitness (based on accepted criterion-referenced standards) is an appropriate expectation for all physical activity professionals.**

Because promoting an active healthy lifestyle (AAHPERD, 1998) for everyone is a primary goal for the profession, those involved in professions related to physical activity and fitness should teach and model the most current "established" behaviors and processes for improving health and physical fitness. According to the *2008 Physical Activity Guidelines for Americans*, adults should engage in 2 hours and 30 minutes a week of moderate-intensity, or 75 minutes a week of vigorous-intensity, aerobic physical activity. Preferably, physical activity bouts should last a minimum of 10 minutes and be spread throughout the week. Also, adults should engage in muscle-strengthening activities for the major muscle groups at least twice a week.

In one of the few studies addressing these health-related physical fitness recommendations of physical activity professionals, Cardinal & Cardinal (2001) found that physical education teachers believe strongly that HPERD professionals should maintain a healthy body fat percentage, and that engaging in regular physical activity is a desired and expected behavior for HPERD professionals.

Administrators also have indicated that they value teacher fitness in the fields of physical activity, identifying lack of teacher fitness as a barrier to implementing quality elementary physical education programs (Sallis, McKenzie, Kolody & Curtis, 1996). What's more, surveys of administrators responsible for hiring physical educators have shown that applicants perceived to be unfit have a much lower chance of employment (Melville & Cardinal, 1997).

In one interesting experiment with more than 800 high school students, those taught by an instructor wearing a "fat suit" reported learning less, viewed the teacher as less of an expert, thought that the instructor did not engage in physical activity, liked the teacher less and tended to engage in less exercise than similar students who were taught by the same instructor without the "fat suit" (Melville & Maddalozzo, 1988).

Overall, these studies suggest not only that that professionals and administrators perceive fitness as important for physical activity professionals, but it also appears to affect student learning. As such, lack of fitness can reflect negatively on the physical activity professional and even hinder employability.

**Implications:** Professionals, school administrators and students perceive physical activity professionals' fitness to be important. Accordingly, NASPE recommends that physical activity professionals strive to achieve at least minimum levels of each component of health-related fitness (based on criterion-referenced standards).

### **Summary**

Participation in regular physical activity at a level sufficient to promote health-related physical fitness is an important behavior for professionals in all fields and levels of physical activity (e.g., coaches, K-12 teachers, physical education and kinesiology faculty members in higher education, fitness professionals). Physical educators, coaches and all fitness and physical activity professionals exert a strong effect on youths as role models. When children and youths see fitness and physical activity professionals engaging in the behaviors that they teach and promote, it can influence their health practices, motor skill acquisition and adoption of similar activity patterns.

An active lifestyle among professionals also promotes instant credibility throughout the community, exemplifies evidence of the value of a physically active lifestyle and can provide a powerful tool for coping with job stresses. And, because professionals and school administrators believe physically active professionals are an essential element to the work setting, physical activity professionals should strive to achieve at least minimum levels of each component of health-related fitness.

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